

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000130096

Entity Name: ADVANCED NURSING OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

357 ALMERIA AVE
STE. 102
CORAL GABLES, FL 33134

Current Mailing Address:

357 ALMERIA AVE
STE. 102
CORAL GABLES, FL 33134 US

FEI Number: 27-4383343

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOTOMAYOR, JOSE A
357 ALMERIA AVE
SUITE 102
CORAL GABLES, FL 33134 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOSE SOTOMAYOR

02/24/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name SOTOMAYOR, JOSE
Address 5151 COLLINS AVE, PH F
City-State-Zip: MIAMI BEACH FL 33140

Title MANAGER
Name SOTOMAYOR, ALBERTA T
Address 5151 COLLINS AVE
PH F
City-State-Zip: MIAMI BEACH FL 33140

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSE SOTOMAYOR

MGR

02/24/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date